A Vision For The Future &
Reflection On The Achievements Of The Past

1988-89 Annual Report

91-00690/

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# Members of the Board

The Princess Margaret Hospital has a unique board whose members are all appointed by the Lieutenant Governor to fill positions which are specified by the Ontario Cancer Act. All board members except the Chairman represent another institution. The following are the 1988-89 board members and the institutions they represent.

**Mr. K. Clarke**
Chairman

**Mrs. B. Johnston**
The Ontario Cancer Treatment and Research Foundation

**Mr. W. Livingston**
The Ontario Cancer Treatment and Research Foundation

**Mr. M. Meighen**
The Ontario Cancer Treatment and Research Foundation

**Dr. B.M. Thall**
The Ontario Cancer Treatment and Research Foundation

**Dean J. Dirks**
The University of Toronto

**Dr. C. Hollenberg**
The University of Toronto

**Dr. B. Langer**
The University of Toronto

**Miss N.B. Shroff**
Board of Trustees
Toronto General Hospital

**Mr. A. Power**
Governing Body of
St. Michael's Hospital

**Mr. D.E. Bawden**
Board of Trustees
Toronto Western Hospital

**Mrs. D. Montgomery**
Board of Governors
Women's College Hospital

**Mr. C.W. Daniel**
Board of Governors
Toronto Wellesley Hospital

**Mr. M. Gross**
Board of Governors
Mount Sinai Hospital

**Dr. A. Zipursky**
The Hospital For Sick Children

**Mr. J.B. Vaughan**
Honorary Board Member


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incorporating
The Princess Margaret Hospital
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Toronto, Ontario M4X 1K9
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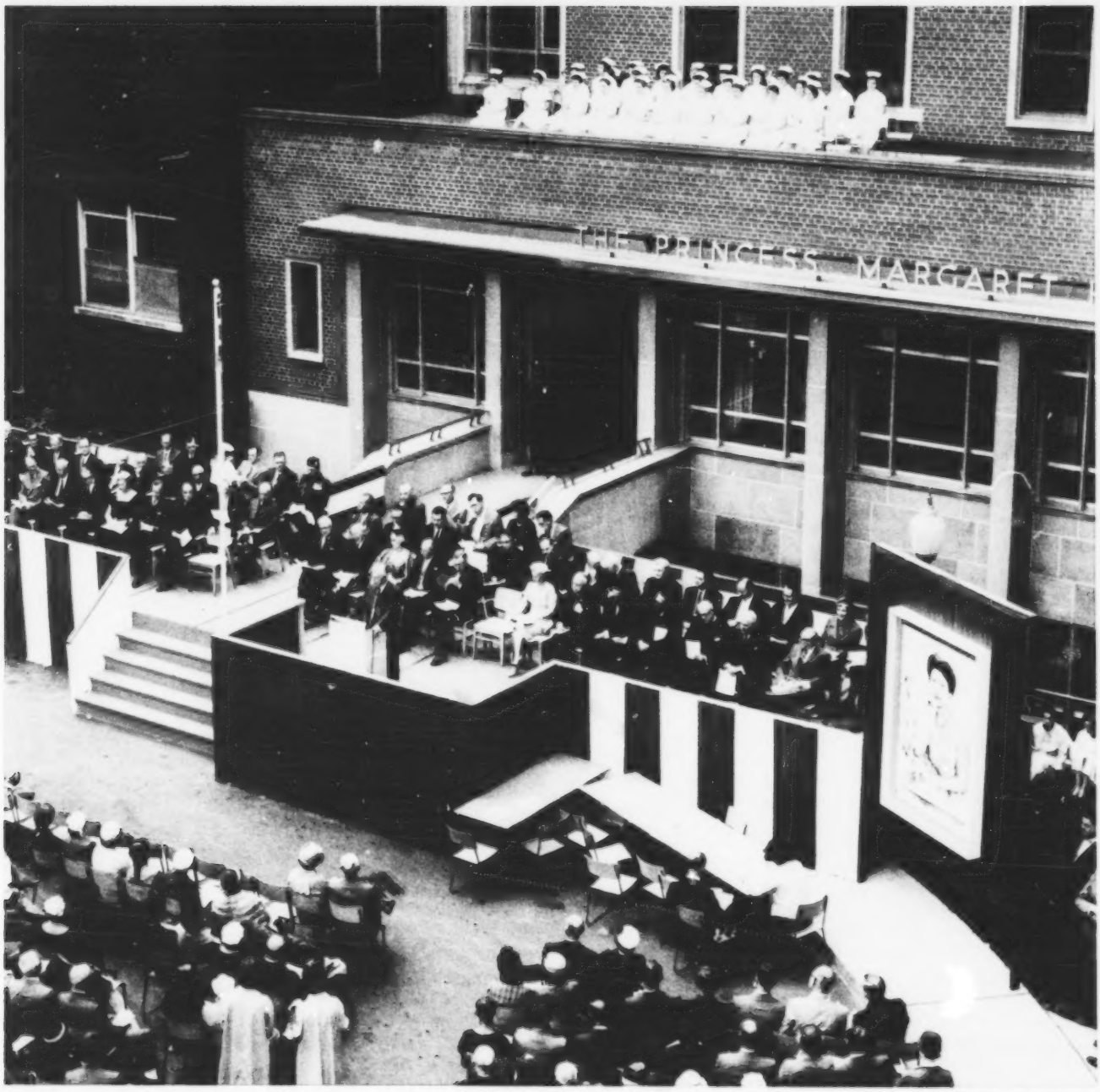
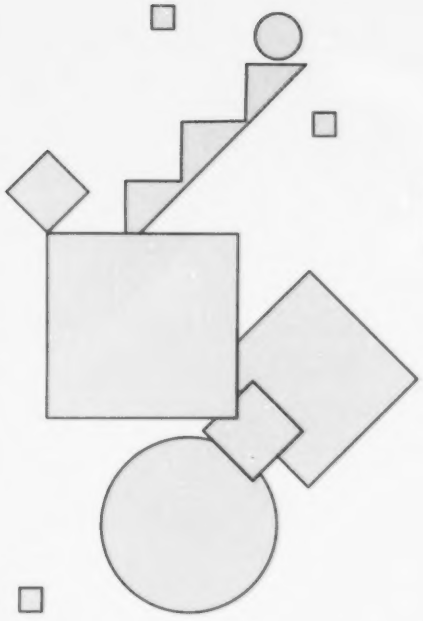



*"It is said that this institute is a hospital of hope..."*

"... It will combine under one roof both research and clinical approaches to the problem of cancer. The investigator and the therapist will be constantly aware of each other's activities and problems. They will work together to their very considerable mutual advantage. In this way a truly concerted and co-ordinated campaign will get at the nature and the cause of cancer to determine measures for control and, we fervently pray, for ultimate cure ... This institute is in effect the very heart of the growing province-wide cancer hospital system ...

It is said that this institute is a hospital of hope..."

**The Honourable Leslie M. Frost, Q.C.**
**Prime Minister of Ontario**
*(Official Opening, September 25, 1958)*



# A Vision for the Future Emerges While 30 Years of Achievement are Celebrated

## Chairman's Message

The past year has provided a unique opportunity to reflect on the achievements of the past 30 years while looking ahead and planning for the new OCI/PMH to be built on University Avenue. However this year has also been one of the most difficult in the history of the organization as staff have faced critical manpower shortages, particularly in nursing and radiation therapy, and struggled to cope with the impact this has had on our ability to treat and care for the number of patients who require our help. The Board has recognized the difficult decisions facing staff and is working closely with staff, the Ministry of Health and the Ontario Cancer Treatment and Research Foundation (OCTRF) to address future funding requirements, staffing levels and issues of staff retention and recruitment.

Day-to-day crises can often impede the development of plans for the future; however this has not been so at OCI/PMH. The Board strongly endorses the steps that Dr. Carlow has taken to strengthen the organization as a whole: the corporate reorganization and appointment of staff to fill two new senior positions of Vice President Oncology Programs and Vice President Research; development of a positive action plan to deal with identified concerns; and the focus on resource management and organizational quality.

During the past year, staff played an integral role in developing the functional program for the new buiding on University Avenue and exploring new options for shared service arrangements with other hospitals to optimize the opportunities for the efficient use of available resources. This program was then developed by Zeidler Roberts Partnership into a creative and exciting hospital design that will meet the needs of our patients and preserve two heritage buildings for the people of Toronto.

We were pleased to received another two-year award from the Canadian Council on Health Facilities Accreditation. This award recognizes organizational excellence in the face of inadequate physical facilities, a situation that cannot be resolved until we move into the new hospital.

A proposal for the formal merger of the OCI/PMH and The Ontario Cancer Treatment and Research Foundation has been endorsed by the Minister of Health. The legislation to create the Ontario Cancer Control Agency is expected to be tabled in the fall of 1989. The boards of both organizations believe that this coming together of the two organizations will strengthen program planning and resource allocation across the province for the benefit of patients and our combined research endeavours.

A particularly enjoyable occasion during the past year was the 30th Anniversary Open House and Reception. It was an opportunity for our staff, volunteers and the public to share in a celebration of the achievements, traditions and people at OCI/PMH. We were pleased to pay a particular tribute to our 30-year staff and volunters and many patients who were successfully treated for cancer the first year the hospital was opened. Earlier in the summer we were also privileged to welcome Her Royal Highness The Princess Margaret to the Hospital.

As we look ahead, we know that the challenges and conditions will be different from the past. Although it will be a new hospital in a new location and will carry new affiliations and new challenges, our 30-year commitment to our patients and staff, to patient care, to teaching and to leadership in research are values and traditions we intend to carry intact into the future.

K. L. Clarke.

**Mr. Kenneth Clarke**

*Mr. Kenneth Clarke*
*Chairman*

*Dr. Donald R. Carlow*
*President & Chief Executive Officer*

## President's Message

I was fortunate that my first week at OCI/PMH in September 1988 coincided with our 30th Anniversary Open House. It was a unique opportunity to meet staff and to learn more about the talent and outstanding achievements of the people in this organization.

Finding ways to develop a corporate climate that will encourage our tradition of excellence in patient care and innovative research in the face of a rapidly changing and stressful health care environment was a major focus during 1988-89 and will continue to be a challenge in the future.

To create a supportive climate to help us meet the demands of the future, the corporate management team was restructured in the spring. It was the first step in organizing people and programs for effective resource management, for the massive planning functions ahead, and for developing strategies for the future. One of the new positions is Vice President Quality and Resource Management; it is the first position at that level in Canada and reflects our enhanced focus on total organizational quality.

The Board, senior management and staff have jointly developed our vision and identified what is needed in terms of staff, funding and programs to support both our critical needs of the present and the challenges of the future.

Although planning for the future is vital, several critical issues required immediate attention in the latter part of the fiscal year. Like most hospitals in Toronto, we have a shortage of nurses that has resulted in the closure of beds. And in the Radiation Therapy Department, an acute shortage of therapy radiographers has recently meant two treatment machines were idle and patient waiting times had stretched up to a totally unacceptable seven weeks shortly after the end of the fiscal year. Patient safety and care is of the highest concern. The hospital is working with the Ministry of Health and the regional cancer centres to address the problem of waiting times and staff shortages. However this is only a partial solution to a problem which has multiple causes such as an international staff shortage, cost of living in Toronto and chronic crowding and overtime in the department.

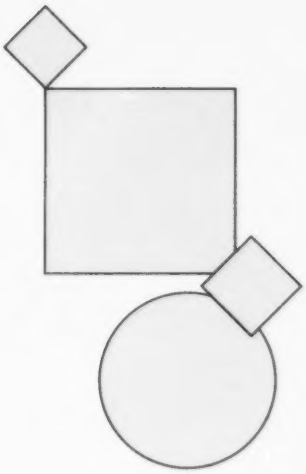
International recruitment for nurses and therapy radiographers has provided some immediate support. However long term planning has also been initiated with greater attention being focused on retention issues. In addition the first of the expanded classes started in September 1988 at the OCI/PMH School for Therapy Radiographers.

In the Research Divisions, the scientists involved in imaging research (magnetic resonance imaging, x-ray imaging and ultrasound imaging) were presented with an excellent opportunity for larger facilities and a broader patient base for their research at Sunnybrook Hospital. The imaging group are regarded as one of the top groups in North America and their presence at OCI/PMH will be missed. However, the six senior research positions they will vacate at the end of 1990 will present an unprecedented opportunity for the OCI/PMH to strengthen and concentrate on our biological research programs for the future.

The development of these research programs will be assisted by Dr. Ronald Buick a senior scientist at OCI/PMH for 10 years, who was appointed to the new position of Vice President Research in July 1989. It was the first of two appointments to complete the corporate reorganization. I was also pleased to announce the appointment of Dr. Simon Sutcliffe, a senior radiation oncologist at OCI/PMH, who was appointed to the new position of Vice President Oncology. Both individuals will bring considerable experience and vision to the corporate management team as we plan for the decades ahead.

D.R. Carlow

**Dr. Donald R. Carlow**



# To Care ... To Discover ... To Teach

# 30 Years of Leadership and Achievement

When the OCI/PMH opened in 1958, the founders envisaged a centre that ...

*"will combine under one roof both research and clinical approaches to the problem of cancer. The investigator and the therapist will be constantly aware of each other's activities and problems. They will work together to their very considerable mutual advantage. In this way a truly concerted and co-ordinated campaign will get at the nature and the cause of cancer to determine measures for control and, we fervently pray, for ultimate cure. Thus our research and treatment resources are put to work in the best and most efficient manner ..."* Opening ceremonies, 1958.

Since the doors opened, clinical staff have focused on diagnosing cancer, and caring for patients using radiation therapy plus chemotherapy and hormonal therapy. In the Physics and Biological Research Divisions, OCI/PMH scientists have been leaders in cell and molecular biology, immunology, radiobiology, imaging and almost all key areas of biological research over the past 30 years.

The contributions of OCI/PMH staff to the understanding, diagnosis and treatment of cancer are extensive. Through the unique collaboration among professionals in clinical and research disciplines, new treatments, plus new equipment for diagnosing and treating patients have been developed.

These developments are the result of a belief 30 years ago that clinical and scientific staff should work together to understand the basic processes of carcinogenesis, to develop new ways of treating cancer and to provide the best care possible for patients and their families.

OCI/PMH discoveries and programs have influenced research and patient care around the world. The following are but a few highlights and are intentionally presented in a random order to give a sense of the broad scope of the achievements in biology, physics, treatment, diagnosis and education ...

**Stem Cell Research**: Research in the 1960's on the origin of blood cells provided definitive evidence that one type of pluripotential stem cell gives rise to all blood cells. The special quantitative spleen colony assay developed at OCI was an international breakthrough that led to studies not possible before. It has led to studies and understanding of diseases such as leukemia and other blood diseases.

**Hodgkin's Disease**: The first trials to prove that Hodgkin's can be cured by radiation therapy were performed at OCI/PMH. The standards developed here are still the basis of international treatment protocols.

**T Cell Receptors**: In the 1980s the receptor on human T lymphocytes was cloned for the first time in an OCI/PMH research lab. This critical breakthrough in immunology research has had and will continue to have a major impact on immunology research around the world.

**Computers In Radiation Therapy Planning**: The Clinical Physics Division pioneered the use of computers in radiation therapy planning and developed techniques which have influenced planning throughout the world.

**Larynx Cancer**: Preservation of the voice through radiation therapy (with surgical removal of the larynx performed only for recurrence) was pioneered at OCI/PMH.

**Understanding Acquired Drug Resistance**: In the 1980s, one mechanism for the apparent ability of tumour cells to become resistant to drugs was elucidated. This has opened the door for numerous studies at OCI and labs around the world into ways to overcome this common clinical problem.

**Lymphoma Classification**: The pathology and research staff made important contributions to the international classification standards for Hodgkin's and non-Hodgkin's lymphomas.

(Continued on page 6)

**Preservation Of The Breast**: Pioneering work at PMH demonstrated that lumpectomy plus radiation was equally effective as mastectomy for patients with early breast cancer, thereby sparing thousands of women unnecessary breast amputations.

**Multiple Myeloma**: Successive studies at OCI/PMH contributed a great deal to the understanding of this disease and the development of successful treatment.

**"The Physics Of Radiology"**: The second edition of this textbook, co-authored by Dr. H. Johns and Dr. J. Cunningham, appeared in 1961 and has since then been the standard textbook in its field in the world. It has been revised and reprinted many times and translated into many languages.

**"The Basic Science Of Oncology"**: This textbook edited by Drs. Tannock and Hill, has sold more than 5,000 copies since it was published in 1987. It is now used internationally in centres such as the Memorial Sloan-Kettering Cancer Centre in New York for teaching students.

**Testes Cancer**: Trials have shown that patients with Stage I cancer of the testes (99% cure rate) can be spared unnecessary surgery and radiation to the retroperitoneal nodes. Patients who do relapse can be successfully treated without any increase in complications or affect on survival.

**Design And Improvement Of Radiation Therapy Machines**: Since the OCI/PMH opened, OCI/PMH staff have played a pivotal role in the development of new radiation therapy machines and improvement on previous designs.

**Patient Support And Teaching**: Special patient teaching programs have been developed by staff in many departments. These programs are an integral part of their treatment and allow many patients to continue their treatment and recovery at home.

**Regulatory Mechanisms**: Discovery of a regulatory difference between normal and leukemic stem cells in the 1960s began a new physiological understanding of chemotherapy.

**First Bone Marrow Transplant Unit In Canada**: This unit now performs more than 50 bone marrow transplants every year for patients with acute myeloblastic leukemia and aplastic anemia.

**Electron Microscopy**: New methods of electron microscopy were developed at OCI which allow molecules and atoms to be seen and identified.

**Magnetic Resonance Imaging**: MRI research has greatly improved the use of this remarkable diagnostic imaging technology for patients with cancer and other medical and physical disorders.

**Radiation Biology And Radiation Chemistry**: Research in this area has contributed significantly to cancer treatment. An ingenious way to study radiation induced damage to cells was developed at OCI/PMH. This has led to improved understanding of the mechanism of radiation chemistry, particularly the role of oxygen in sensitizing tumour cells.

**Ocular Melanoma**: OCI/PMH is one of the major centres in the world for treating this uncommon cancer and in evaluating its management by surgery or radiation therapy.

**Dental Program**: A unique dental clinic which treats patients before cancer treatment, has greatly reduced the incidence of oral complications among patients. A program to fit surgical patients with special oral splints prior to surgery, has also enhanced the recovery time for many patients.

**Ultrasound Imaging**: A high resolution scanner for ultrasound imaging to investigate breast cancer was developed at OCI/PMH.

**Anal/Rectal Cancer**: Successful treatments for anal and rectal cancer using radiation and chemotherapy were developed at OCI/PMH. This has preserved rectal function for many patients who would otherwise have needed colostomies.

**Quality Of Life Studies**: Various studies at OCI/PMH have pioneered improved understanding about information needs in patients, how patients make decisions and evaluation of symptom distress.

**Thyroid Cancer**: PMH has rationalised the role of megavoltage radiation therapy in the management of thyroid cancer.

**Ovarian Cancer**: PMH has introduced a novel technique of whole abdomen irradiation in treatment of selected patients with cancer of the ovaries that has led to improved survival.

## A Tradition Of Excellence ...

Peer recognition is the mark of excellence among professional staff. Through the past 30 years, OCI/PMH staff have received many international awards while on staff. A very small part of that list shows the diversity of awards ... **Fellows of the Royal Society of Canada**: Dr. E.A. McCulloch (President, 1987), Dr. W.R. Bruce, Dr. J. Till, Dr. H.E. Johns, Dr. G.Whitmore, Dr. T.W. Mak; **Order of Canada**: Mrs. Ruth Frankel (Companion), Officers: Dr. H. Johns, Dr. V. Peters, Dr. E.A. McCulloch; **Gairdner Foundation International Awards**: Dr. T.W. Mak, Dr. H.E. Johns, Dr. E.A. McCulloch/Dr. J. Till; **Gold Medal From American Society of Therapeutic Radiology and Oncology**: Dr. V. Peters, Dr. H. Johns, Dr. W. Rider; **W. D. Coolidge Award, American Association of Physicists in Medicine**: Dr. H. Johns, Dr. J. Cunningham; **University Professor, University of Toronto**: Dr. H.E. Johns, Dr. J. Till, Dr. E.A. McCulloch ... In 1988-89 the list grew even longer (see page 10).

## *The Leaders At The Start ...*

*The OCI/PMH was the vision of a group of individuals dedicated to improving care of patients with cancer. When the OCI/PMH opened, the staff pictured here were among the ones who took that vision and helped to make it a reality. Clearly they were not alone but they helped to guide and inspire the development of standards for which this Institute is renowned...*

1. *Dr. Arthur Ham: Head, Biological Research Division until 1963.*
2. *Dr. Clifford Ash: Director 1952 until 1975.*
3. *Miss Phyllis Burgess: Director of Nursing until 1977.*
4. *Mr. John Law: Administrator until 1974.*
5. *Mrs. Ruth Frankel: Founder and Honourary Life President of the Auxiliary to The Princess Margaret Hospital and Lodge.*

*Dr. Harold Johns: Head, Physics Division until 1980 (see page 11)*

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# To Care ... To Discover ... To Teach ... In 1988-89

## Two-Year Accreditation

The OCI/PMH underwent accreditation in the fall of 1988 and was again given a 2-year award from the Canadian Council on Health Facilities Accreditation. This award reflects the achievements of our staff within the physical limitations of the current facility.

## Interface Pathology Lab

A new Pathology laboratory that provides diagnostic tests on the leading edge of research was opened in late 1988. The Interface Laboratory derives its name from the fact that the specialized tests conducted in the lab are on the border or interface between experimental research techniques and routine clinical applications. This lab provides a unique opportunity for OCI/PMH scientists, pathologists, clinicians and lab technologists to collaborate on developing new techniques and on developing clinical applications for techniques developed in the research divisions. The Interface Lab will be used by pathologists to do more refined cancer studies, and by clinicians and basic researchers to evaluate new discoveries related to cancer and its control. Many of the techniques will involve immunological techniques - procedures which use monoclonal antibodies in different ways to identify cells. Although some techniques have been used here before, this is the first time the procedures and staff have been brought together in a dedicated lab.

## Theory Of Care To Guide Nursing Practice

After several years of careful study, a task force in the Department of Nursing has selected a theory of nursing practice they believe will significantly enhance both patient care and the nursing environment at OCI/PMH. The Jean Watson Theory of Caring promotes a framework within which patient care, professionalism, job satisfaction, interdisciplinary collaboration and health outcomes can all be enhanced. Within this framework, thoughtful and systematic practice, patient centred care and development of a positive environment for both the nurse and patient are encouraged.

(Continued on page 10)

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1. *Under sunny skies, a crowd of visitors to the September 25th Open House released a cloud of colourful balloons, 30 years to the day after the OCI/PMH officially opened its doors.*
2. *Three patients with the children they had after successful treatment of their disease, truly symbolized the great skill of our staff and the advances that have been made in cancer treatment. At the left front is Jerry Lewicki and baby Brandon and at right front is Fran McFadden with Laura and Katie. At the back is Ken Gaukel with Niki, Ashley and Melissa.*
3. *Dr. Peter Ottensmeyer, a senior scientist in the Physics Division, was one of more than 200 staff and volunteers who gave talks to visitors or tours of OCI/PMH during the Open House.*
4. *Her Royal Highness The Princess Margaret, was a special guest at OCI/PMH during July 1985. She is the official patron of the Auxiliary to The Princess Margaret Hospital and Lodge, and was delighted by the warm welcome from the honour guard of volunteers in their cheerful yellow smocks.*
5. *Glenn Covert was one of the first patients at OCI/PMH the year the hospital opened. He was just two years old at the time – the same age his son Tyler is now. Glenn was one of many original patients who attended a special reception for 30-year staff, volunteers and patients.*

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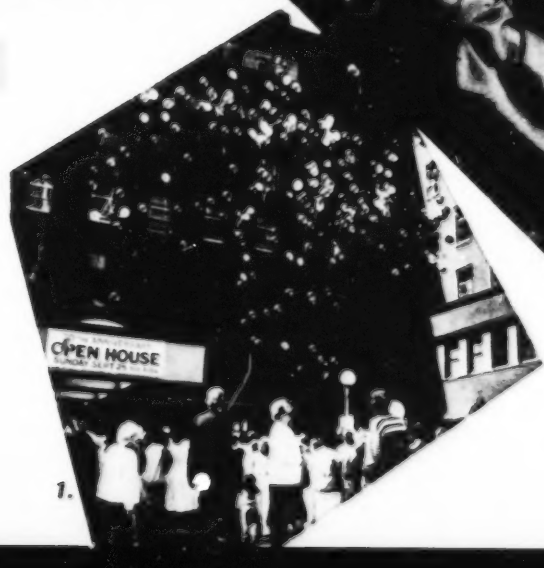


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## Progress On Future Plans

In 1988-89, major progress was made in developing programs and plans for the new OCI/PMH. Early in the year staff, with the assistance of Agnew Peckham Associates, completed the functional program which is a detailed description of the function, space needs and critical adjacencies for each department and program. Based on this written description, plus the available budget, space and other criteria, the architects developed dozens of designs before proposing the design shown on page 13. By the end of the year, staff and architects were working on the block plans or more detailed outlines of the space for each department.

Plans were also completed for the PMH satellite radiation therapy facility to be located in the basement of Mt. Sinai Hospital. This facility, with four radiation therapy machines will be completed by the end of 1990. It will provide additional facilities to treat patients and will be linked with the rest of PMH when the new hospital opens in 1993.

## Safety Programs Developed

OCI/PMH received a provincial safety award from the Health Care Occupational Health and Safety Association for an unprecedented sixth consecutive year. Nonetheless the commitment to new safety programs remains a high priority.

Workplace Hazardous Information Management Systems (WHIMS) is being implemented throughout the Institute as required by law. This has involved developing inventories of and manuals for handling all hazardous compounds, plus mandatory training programs for every employee and student.

In hospitals across Toronto, heightened awareness and concerns about contagious diseases, resulted in extensive work through 1989 to develop a proactive system of handling patients and body substances that would reduce the risk of infection to staff and other patients. This method is called body substance precautions (BSP) and will be implemented in the coming year.

## To Teach ...

OCI/PMH is the largest centre in Canada for training radiation oncologists (18 residents)and medical oncologists (6 residents). Graduates have been influential in developing and setting standards of care across the country for 30 years.

The research divisions in conjunction with the University of Toronto, established a graduate student program in 1959, the Department of Medical Biophysics, based at OCI/PMH. In 1988 there were 70 graduate students registered in the cell and molecular biology and medical physics programs at OCI/PMH.

## Terry Fox Program

The OCI/PMH was awarded a five-year Terry Fox program and about $600,000 for fellowships to encourage physicians to develop their research skills and pursue their interest in both clinical and research programs.

The National Cancer Institute which administers the Terry Fox funds, recognized that there are very few programs to encourage the development of clinical research skills and/or basic research skills in physicians. Physician-scientists with skills in both fields are rare, but play a vital role in fostering links between scientists and physicians and between the laboratories and the clinics. As a research institute and hospital, the OCI/PMH provides an ideal setting for these programs. The Terry Fox Committee chaired by Dr. Ian Tannock will appoint five to seven fellows for training periods of two to three years.

## Awards and Honours

Congratulations to the many staff who received awards during 1988-89 in recognition of their achievements. Among the staff who were honoured were: Dr. E.A. McCulloch, Officer of the Order of Canada; Dr. T.W. Mak, Emil von Behring Prize from Philipps-Universität in Marburg, West Germany; Dr. V. Ling, Chester Stock Award from Memorial Sloan Kettering Cancer Centre and Milkin Family Medical Foundation Award; Dr. J. Cunningham, William D. Coolidge Award from the American Association of Physicists in Medicine; Dr. R. Clark & Dr. N. Boyd, Dr. R. Hasselback, Canadian Women's Breast Foundation Awards For Excellence.

1. *Dr. Jack Cunningham was awarded the prestigious William Coolidge medal from the American Association of Physicists in Medicine, shortly before retiring as Chief of Clinical Physics after almost 31 years with OCI/PMH. He is renowned for his early work in the development of cobalt therapy units with Dr. H. Johns, his work in radiation dosimetry and pioneering development of computerized-treatment planning.*

2. *Throughout the year, the staff and board spent countless hours with the architects reviewing many different designs for the new OCI/PMH to determine the best way to accommodate the special needs of our patients and all departments.*

3. *Dr. Harold Johns, former head of Physics and "father of the cobalt treatment machine", was honoured on a stamp issued in June 1988 to commemorate Canadian scientific and technological innovations. It is just one of many awards received in his more than 40 years of outstanding research, teaching and writing in medical physics.*

4. *The class of 1991, which started in September 1988, is the second of the enlarged classes at the School For Therapy Radiographers. The larger classes will help to meet the critical shortage of therapy radiographers across the country. The 11 students based at OCI/PMH will be joined for their classroom studies by an additional 25 students from affiliated clinics across Ontario, the Maritimes and Saskatchewan. The goal is to have up to 36 students enter the program each year.*

5. *Donors make a difference! The Order of the Eastern Star Ontario branches donated about $80,000 to equip a dental clinic for specialized care of cancer patients. This donation, the largest OCI/PMH has ever received from a service organization, represents a remarkable gift from the 35,000 members across Ontario. Thank you to OES and all donors to OCI/PMH* *(see page 15).*

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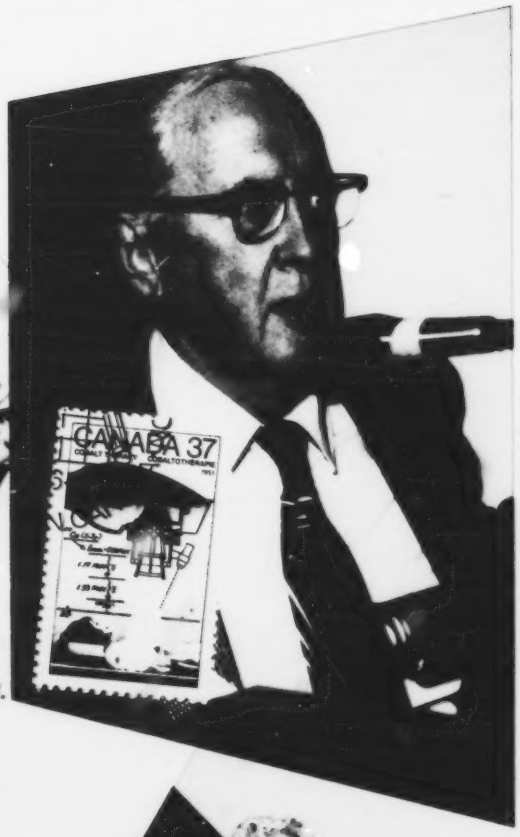


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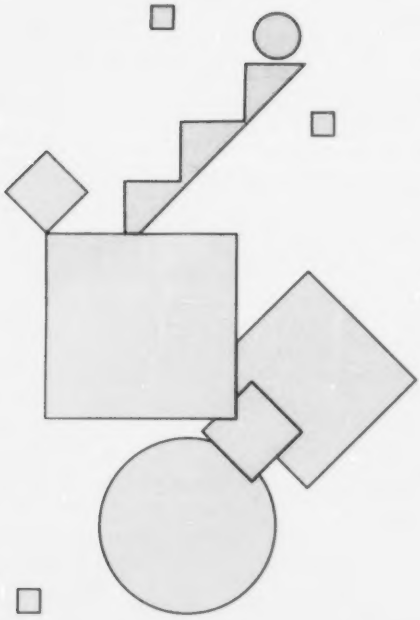


# To Care ... To Discover ... To Teach

## In A Unified Cancer System With A Flagship Hospital and Research Centre

*"We know that the challenges and conditions will be different from the past ... but our 30-year commitment to our patients and staff, to patient care, to teaching and to leadership in research are values and traditions we intend to carry intact into the future ..."*

**Kenneth Clarke, Chairman**

By the end of 1993, the new OCI/PMH will open its doors on University Avenue. But when those doors open, it will reveal much more than just a new building. It will reveal a centre which:

... is the heart and core of an extensive and comprehensive cancer care system

... has an environment and infrastructure to promote the interaction of clinical and research staff to develop new approaches to diagnosis and treatment

... has a unique linkage and integration with the provincial cancer centres

... reaches out to patients from across Ontario.

It will also reveal a dedicated group of clinical, research and support staff:

... who have a commitment to high standards of patient care and a spirit of critical inquiry and research

... whose collective skills cover every type of cancer and oncology program including medical, radiation and surgical oncology, oncologic imaging and oncologic pathology

... who are committed to sharing those skills and providing highly specialized programs on a regional and provincial level

... who serve as role models and teachers for the oncology professionals and scientists of the future

... who are committed to a leadership role in developing standards for diagnosis and patient care

... and who, above all, are committed to our patients, who are the focal point for our programs and the inspiration behind our efforts.

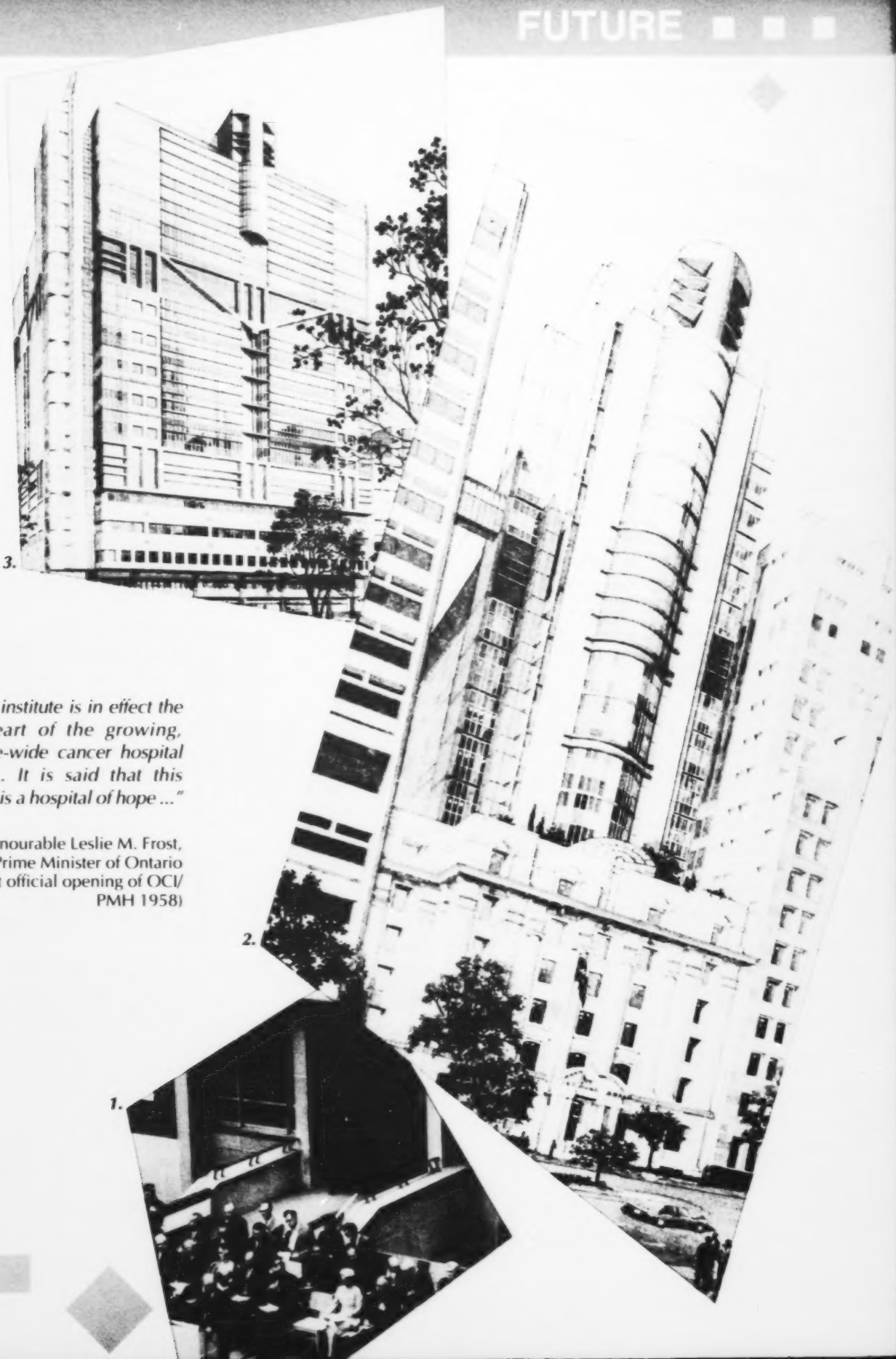
### A Unique Building To Support Our Vision

From University Avenue, the new OCI/PMH will be a unique and skilful blend of the old and new. A sleek new tower will rise above the traditional facade of 610 University Avenue and the art deco design of the old Hydro building. At the back, a cantilever which extends part way over Murray Street ensured the heritage buildings would be preserved by providing the additional space needed to ensure a building that will function well for all OCI's specialized programs.

A bright and spacious atrium, the design trademark of architect Eb Zeidler, will fill the interior of the building with light. This atrium plus a roof garden are examples of the thought that has gone into planning a building that will be attractive and welcoming for patients and visitors.

At several levels, the OCI/PMH and Mt. Sinai Hospital will also be physically linked to facilitate mutual access to equipment and interaction for programs that will be shared by the two centres.

1. *The official opening of The Princess Margaret Hospital, September 25, 1958.*
2. *The new OCI/PMH as viewed from University Avenue.*
3. *The back view of the new OCI/PMH.*



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*"... This institute is in effect the very heart of the growing, province-wide cancer hospital system... It is said that this institute is a hospital of hope ..."*

The Honourable Leslie M. Frost,
Prime Minister of Ontario
(at official opening of OCI/
PMH 1958)

# Statistics

**Table 1 New Patients Referred to The Princess Margaret Hospital by County or District of Residence (April 1988 - March 1989)**

**Malignant & Non-Malignant**

| | 1988-89 | 1987-88 |
|---|---|---|
| Ontario | **6,268** | 6,305 |
| Outside Ontario | **109** | 122 |
| Outside Canada | **62** | 66 |
| Total | **6,439** | 6,493 |

**Table 2 Cases of Malignant Disease Distribution by Site of Malignancy and Sex (April 1988 - March 1989)**

**Site**

| | | |
|---|---|---|
| Head and Neck | | 148 |
| *Total = 207* | | *59* |
| Ear, nose, throat | | 236 |
| *Total = 327* | | *91* |
| Gastrointestinal | | 447 |
| *Total = 754* | | *307* |
| Respiratory | | 622 |
| *Total = 917* | | *295* |
| Skin | | 362 |
| *Total = 592* | | *230* |
| Breast | | 6 |
| *Total = 1,347* | | *1,341* |
| Gynaecological | | 0 |
| *Total = 490* | | *490* |
| Genitourinary | | 604 |
| *Total = 666* | | *62* |
| Lymphatic, haematopoietic | | 365 |
| *Total = 658* | | *293* |
| Other sites | | 312 |
| *Total = 605* | | *293* |

Males = 3,102
Females = 3,461
Total = 6,563

**Table 3 New Patients With Malignant Disease Distribution by Age and Sex (April 1988 - March 1989)**

**Age**

| | | |
|---|---|---|
| 0-19 | | 33 |
| *Total = 56* | | *23* |
| 20-29 | | 121 |
| *Total = 250* | | *129* |
| 30-39 | | 177 |
| *Total = 451* | | *274* |
| 40-49 | | 248 |
| *Total = 744* | | *496* |
| 50-59 | | 569 |
| *Total = 1,274* | | *705* |
| 60-69 | | 939 |
| *Total = 1,805* | | *866* |
| 70-79 | | 616 |
| *Total = 1,134* | | *518* |
| 80-89 | | 168 |
| *Total = 336* | | *168* |
| 90+ | | 19 |
| *Total = 47* | | *28* |

Male = 2,890
Females = 3,207
Total = 6,097

**Number of Treatments Given in the Radiation Therapy Department April 1988 - March 1989**

| | 1988-89 | 1987-88 |
|---|---|---|
| **External Beam** | | |
| Superficial x-ray | **792** | 1,013 |
| Deep x-ray | **1,963** | 2,009 |
| Cobalt | **38,716** | 39,958 |
| Linear accelerators: | | |
| Low energy | **8,897** | 8,433 |
| High energy | **27,087** | 26,986 |
| Total | **77,455** | 78,399 |
| Inpatient treatments | **12,235** | 12,933 |
| Outpatient treatments | **65,220** | 65,466 |
| Total | **77,455** | 78,399 |
| **Sealed Sources** | | |
| Intracavity | **186** | 235 |
| Interstitial (needles, wires & seeds) | **32** | 32 |
| Strontium applicators | **38** | 65 |
| Total | **256** | 332 |

**Total Outpatient Visits To PMH April 1988 - March 1989**

| | 1988-89 | 1987-88 |
|---|---|---|
| New patient registrations in OPD | **5,366** | 5,337 |
| Follow-up visits in OPD | **55,071** | 58,509 |
| Day care | **7,959** | 6,926 |
| External beam XRT treatments to outpatients | **65,220** | 65,466 |
| External beam XRT treatments to inpatients from other hospitals | **2,206** | 2,473 |
| Visits to cell separator | **382** | 567 |
| Total | **136,204** | 139,278 |

**Services At Peripheral Clinics April 1988 - March 1989**

| Clinic | New Patients | Total Visits |
|---|---|---|
| North Bay | 128 | 1,351 |
| Peterborough | 6 | 1,292 |
| Sault Ste. Marie | 32 | 620 |
| Sudbury | 35 | 941 |
| Timmins | 18 | 959 |
| Total | 219 | 5,163 |

# Our Donors ... Providing Vital Support

Our donors provide an important part of the support for OCI/PMH research and clinical programs. The PMH Trust has for many years accepted and managed donations made directly to The Princess Margaret Hospital. This is separate from The Ontario Cancer Care Fund which is currently being set up with The Ontario Cancer Treatment and Research Foundation and the Canadian Cancer Society, Ontario Division, to raise the $50 million needed to rebuild the OCI/PMH and the treatment centres in Hamilton, London and Sudbury.

The operations of the PMH are financed similarly to other public hospitals in Ontario except that additional funds are received from The Ontario Cancer Treatment and Research Foundation (OCTRF). Basic support for clinical and fundamental research at OCI is also provided by OCTRF and the Province of Ontario. In addition, research grants, contracts, fellowships and scholarships from the following sources have provided further support necessary for research programs.

Adria Laboratories
Alberta Heritage Foundation
American Cyanamid Co.
Banting Research Foundation
Bristol Myers Company
Canadian Medical Association
Canadian Women's Breast Cancer Foundation
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Massachusetts Institute of Technology
McGill University
Medical Research Council
Ministry of Health
Ministry of National Health and Welfare
National Cancer Institute of Canada
National Cancer Institute, National Institutes of Health (USA)
Ortho Pharmaceutical
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Quadralogic Technologies
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Schering Canada Inc.
T Cell Sciences Inc.
Technicare Corporation
University of Toronto
The Upjohn Company of Canada
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## Substantial Donations

We are grateful to the following individuals, groups and companies who have supported OCI/PMH through the PMH Trust during the past year...

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Ms. S. Abate
Dr. I. Ackerman
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Atemix Inc.
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Mrs. M. Zaubris

# The Ontario Cancer Institute Financial Statements - March 31, 1989

## Auditors' Report

To the Members
of The Ontario Cancer
Institute:

We have examined the balance sheet of The Ontario Cancer Institute as at March 31, 1989 and the statements of operations (general fund), general fund balance and changes in cash position for the year then ended. Our examination was made in accordance with generally accepted auditing standards, and accordingly included such tests and other procedures as we considered necessary in the circumstances.

In our opinion, these financial statements present fairly the financial position of the Institute as at March 31, 1989 and the changes in its financial position for the year then ended in accordance with the accounting policies described in note 1 to the financial statements applied on a basis consistent with that of the preceding year.

Toronto, Canada,
June 7, 1989.

Clarkson Gordon

Chartered Accountants

## The Ontario Cancer Institute Balance Sheet - March 31, 1989

(with comparative figures at March 31, 1988)

| Assets | 1989 | 1988 | Liabilities and Fund Balance | 1989 | 1988 |
|---|---|---|---|---|---|
| **General Fund** | | | | | |
| Current: | | | Current: | | |
| Cash | | $548,714 | Accounts payable | | |
| Investments (note 6) | **$ 9,535,483** | 5,989,430 | and accrued liabilities | **$8,180,794** | $5,908,752 |
| Accounts receivable (note 7) | **5,137,089** | 7,030,719 | Research grants received in advance | **1,386,411** | 551,459 |
| Inventory of supplies, at cost | **916,958** | 864,553 | Capital grants received in advance | **2,065,803** | 4,048,387 |
| Prepaid expenses | **231,242** | 227,543 | | | |
| Due from P.M.H. Trust (note 4) | **4,570** | 12,358 | Total current liabilities | **11,633,008** | 10,508,598 |
| Total current assets | **15,825,342** | 14,673,317 | Fund Balance | **36,708,443** | 36,463,961 |
| Fixed assets (note 8) | **32,516,109** | 32,299,242 | | | |
| | **48,341,451** | 46,972,559 | | **48,341,451** | 46,972,559 |
| **New Facility Fund** | | | | | |
| Cash | **399,628** | | Capital grants received in advance | | |
| Investments (note 6) | **4,664,099** | 301,655 | (note 9) | **6,123,645** | 301,655 |
| Accounts receivable (note 5) | **1,059,918** | | Capital grants expended | **2,965,292** | 198,345 |
| Construction in progress (note 9) | **2,965,292** | 198,345 | | | |
| | **9,088,937** | 500,000 | | **9,088,937** | 500,000 |
| | **$57,430,388** | $47,472,559 | | **$57,430,388** | $47,472,559 |

(See accompanying notes)

On behalf of the Board:

R-B. Shuttle
Member

Member

## The Ontario Cancer Institute Statement Of Operations (General Fund) for the year ended March 31, 1989
(with comparative figures for the year ended March 31, 1988)

| | 1989 | 1988 |
|---|---|---|
| Revenue for patient care, research and education: | | |
| Ontario Ministry of Health and others for patient services | **$55,736,202** | $51,000,402 |
| The Ontario Cancer Treatment and Research Foundation | **4,670,657** | 4,397,392 |
| Other granting agencies | **9,767,539** | 8,556,123 |
| Recoveries and other income | **3,657,836** | 3,254,984 |
| | **73,832,234** | 67,208,901 |
| Expenses for patient care, research and education: | | |
| Salaries and wages | **52,066,532** | 47,585,259 |
| Supplies and other operating expenses | **21,739,888** | 19,481,213 |
| | **73,806,420** | 67,066,472 |
| Excess of revenue over expenses before depreciation | **25,814** | 142,429 |
| Depreciation of buildings (note 1(d)) | **2,897,495** | 605,958 |
| Depreciation of equipment and furniture | **2,501,344** | 2,480,082 |
| | **5,398,839** | 3,086,040 |
| Excess of expenses over revenue for the year | **$(5,373,025)** | $(2,943,611) |

(See accompanying notes)

## The Ontario Cancer Institute Statement Of General Fund Balance for the year ended March 31, 1989
(with comparative figures for the year ended March 31, 1988)

| | 1989 | 1988 |
|---|---|---|
| Balance, beginning of year | **$36,463,961** | $31,332,809 |
| Deduct excess of expenses over revenue for the year | **(5,373,025)** | (2,943,611) |
| | **31,090,936** | 28,389,198 |
| Add grants for building alterations and equipment: | | |
| Ontario Ministry of Health | **4,939,269** | 7,428,494 |
| The Ontario Cancer Treatment and Research Foundation | **51,896** | 127,382 |
| P.M.H. Trust (note 4) | **44,123** | 90,274 |
| Other | **582,219** | 428,613 |
| | **5,617,507** | 8,074,763 |
| Balance, end of year | **$36,708,443** | $36,463,961 |

(See accompanying notes)

## The Ontario Cancer Institute Statement of Changes in Cash Position for the year ended March 31, 1989

(with comparative figures for the year ended March 31, 1988)

| | 1989 | 1988 |
|---|---|---|
| **General Fund** | | |
| Cash and investments, beginning of year | **$6,538,144** | $13,054,313 |
| Cash provided by (used in) operating activities: | | |
| Excess of expenses over revenue for the year | **(5,373,025)** | (2,943,611) |
| Add back depreciation, being an item not requiring a current cash outlay | **5,398,839** | 3,086,040 |
| | **25,814** | 142,429 |
| Changes in non-cash working capital balances related to operations | | |
| Accounts payable and accrued liabilities | **1,605,864** | 80,230 |
| Accounts receivable | **1,893,630** | (2,814,536) |
| Research grants received in advance | **834,952** | 554,917 |
| Other | **(46,515)** | (13,249) |
| | **4,313,745** | (2,050,209) |
| Cash provided by (used in) capital activities: | | |
| Capital grants received | **3,443,043** | 3,114,905 |
| Interest on capital grants received in advance | **191,880** | 493,898 |
| Capital asset acquisitions | **(5,617,507)** | (8,074,763) |
| Increase in accounts payable | **666,178** | |
| | **(1,316,406)** | (4,465,960) |
| Net change in cash position during the year | **2,997,339** | (6,516,169) |
| Cash and investments, end of year | **$9,535,483** | $6,538,144 |
| **New Facility Fund** | | |
| Cash and investments, beginning of year | **$301,655** | |
| Cash provided by (used in) capital activities: | | |
| Capital grants received | **8,550,000** | $500,000 |
| Interest on capital grants received in advance | **38,937** | |
| Capital asset acquisitions | **(2,766,947)** | (198,345) |
| Increase in accounts receivable | **(1,059,918)** | |
| Net change in cash position during the year | **4,762,072** | 301,655 |
| Cash and investments, end of year | **$5,063,727** | $301,655 |

(See accompanying notes)

## The Ontario Cancer Institute Notes To Financial Statements - March 31, 1989

***1. Summary of significant accounting policies***

*(a) Fund accounting -*
*The financial statements segregate the activities of the Institute as follows:*

*(i) General fund - includes the activities associated with the day-to-day operations of the Institute at its current location.*

*(ii) New facility fund - includes the activities related to the new facility to be located at University Avenue.*

*(b) Basis of operating funding -*
*Pursuant to the Health Insurance Act the Institute receives funds from the Ontario Ministry of Health (the "Ministry") to substantially cover its operating costs. Funds are received during the year based on a total amount approved by the Ministry in respect of the fiscal year. The portion of Ministry funding applicable to operations is credited to operating revenue in the year to which the grant applies.*

*(c) Capital grants -*
*Grants received for capital purposes from the Ministry and other sources are credited to the fund balances as the related expenditures are made. Amounts received in advance of the related expenditure, including interest earned thereon, are deferred.*

(d) *Depreciation -*
*Substantially all fixed assets acquired by the Institute are financed by the Ministry and The Ontario Cancer Treatment and Research Foundation ("OCTRF"). The cost of such assets is recorded in these financial statements and depreciated on a straight-line basis at the following annual rates:*
*Buildings - the number of years during which they will be used by the Institute.*
*Equipment and furniture - 5 - 20%*

(e) *Pension Plan -*
*Pension expense represents cash contributions and accruals for the estimated funding requirements for planned adjustments to benefits.*

**2. Income tax status**

*The Institute is registered as a charitable organization under the Income Tax Act (Canada) and is therefore exempt from income taxes and may issue tax-deductible receipts to donors.*

**3. Pension plan**

*The Institute has a voluntary pension plan for its employees. Based on the most recent actuarial valuation of the plan as at January 1, 1986, there is no untunded liability. Total pension expense for the year was $2,099,579 (1988 - $1,885,274).*

**4. P.M.H. Trust**

*P.M.H. Trust is a separate corporation without share capital and with its own Board of Directors. P.M.H. Trust receives funds which are provided to the Institute for capital and operating purposes in connection with cancer research, education and treatment. The accounts of P.M.H. Trust are not included in these financial statements.*

**5. Ontario Cancer Care Fund**

*The Ontario Cancer Care Fund ("OCCF") has been established by the Institute, the OCTRF and the Canadian Cancer Society (Ontario Division) to raise funds for the Institute and the OCTRF. The Institute plans to use its share of the funds to help finance the new facility on University Avenue.*

*The accounts of the OCCF have not been included in these financial statements.*

*An amount of $750,000, due from OCCF, is included in accounts receivable in the new facility fund. This amount is a non-interest bearing long-term receivable.*

**6. Investments**

*Investments consist of short-term notes that are recorded at cost plus accrued interest. Market value is equivalent to this amount.*

**7. Accounts receivable consist of:**

| | 1989 | 1988 |
|---|---|---|
| Patients' accounts | $1,144,585 | $1,414,406 |
| Ontario Ministry of Health | 2,611,258 | 4,373,930 |
| The Ontario Cancer Treatment and Research Foundation | 587,297 | 628,798 |
| Professional groups associated with the Institute | 245,178 | 267,243 |
| Other funding agencies | 99,564 | 135,587 |
| Miscellaneous | 449,207 | 210,755 |
| Total | $5,137,089 | $7,030,719 |

**8. Fixed assets consist of:**

| | 1989 | 1988 |
|---|---|---|
| Land | $ 3,033,365 | $ 3,033,365 |
| Buildings | 26,329,804 | 24,298,976 |
| Equipment and furniture | 31,952,586 | 28,812,854 |
| | 61,315,755 | 56,145,195 |
| Less accumulated depreciation | 29,579,578 | 25,577,865 |
| | 31,736,177 | 30,567,330 |
| Construction in progress | 779,932 | 1,731,912 |
| Total | $32,516,109 | $32,299,242 |

**9. New Facility**

*In August 1986, the Ministry approved the construction of a new facility for the Institute. The initial estimate of construction costs is approximately $161,000,000 (in 1986 dollars), to be funded by a capital grant from the Ministry and through donations. It is anticipated that the new facility will be completed in fiscal 1994.*

*The capital grants, other funding, and expenditures related to this project are accumulated in the new facility fund. Cumulative funding and expenditures since inception of the project are as follows:*

| | 1989 | 1988 |
|---|---|---|
| Funding: | | |
| Ministry of Health | $9,050,000 | $500,000 |
| Interest | 38,937 | |
| | 9,088,937 | 500,000 |
| Expenditures: | | |
| Construction in progress - | | |
| Equipment | 1,907,187 | |
| Consulting and architect fees | 989,083 | 198,345 |
| Project administration | 69,022 | |
| | 2,965,292 | 198,345 |
| Capital grants received in advance | $6,123,645 | $301,655 |

**10. Commitments**

*At March 31, 1989, outstanding purchase orders related to the new facility amounted to approximately $4.2 million.*

**11. Liability insurance**

*On July 1, 1987, a group of hospitals, including the Institute, formed the Hospital Insurance Reciprocal of Ontario ("HIRO"). HIRO is a pooling of the public liability insurance risks of its members. All members of the pool pay annual premiums which are actuarially determined. All members are subject to assessment for losses, if any, experienced by the pool for the year in which they were members. No assessments have been made to March 31, 1989.*

**12. Comparative figures**

*Certain of the 1988 comparative figures have been reclassified to conform with the presentation adopted in the current year.*

# Members of the Staff

D.R Carlow, M.D.*

President and
Chief Executive Officer

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Acting Chief: S. Herman, M.D.

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M. Lau, M.D.
M. Lee, M.D.**
C. Parsons, M.D.**
S. Rodrigues, M.D.

(Clinical Associates Outpatients)
P. Chart, M.D.
R. Hevenor, M.D.
M. Horani, M.D.
C. Larochelle, M.D.
G.K. Thompson, M.D.

## Biological Research Division

Head: E.A. McCulloch, M.D.
S. Benchimol, Ph.D.
R.N. Buick, Ph.D.
A.J. Cunningham, Ph.D.
J. Gariepy, Ph.D.
R. Gronostajski, Ph.D.
V. Ling, Ph.D.
H. Llewellyn-Thomas, Ph.D.
T.W. Mak, Ph.D.
R.G. Miller, Ph.D.
S. Minkin, Ph.D.
N. Miyamoto, Ph.D.
C. Paige, Ph.D.
J.E. Till, Ph.D.
D. Tritchler, Sc.D.

## Physics Division

Head: G.F. Whitmore, Ph.D.
H. Alasti-Hamed, M.Sc.
M.C. Archer, Ph.D.
M. Bronskill, Ph.D.
J.R. Cunningham, Ph.D.**
G. DeBoer, Ph.D.
S. Foster, Ph.D.
D.M. Galbraith, B.Sc.
J. Grant, M.Sc.
M. Henkelman, Ph.D.
R.P. Hill, Ph.D.
J.W. Hunt, Ph.D.
B. Japp, B.Sc.
J. Jezioranski, M.Sc.
P.M.K. Leung, Ph.D.
M. Lumley, M.Sc.
K. Mah, M.Sc.
A. Mosseri, M.Sc.
F.P. Ottensmeyer, Ph.D.
D. Plewes, Ph.D.
A.M. Rauth, Ph.D.
A.J. Rawlinson, M.Sc.
S. Rose, M.Eng.
D. Spencer, Ph.D.
W.B. Taylor, B.Eng.
J. Van Dyk, M.Sc.
M. Yaffe, Ph.D.

## Honorary Staff

H.E. Johns, Ph.D.
M.V. Peters, M.D.
W.D. Rider, M.B.
T.C. Brown, M.B.

## Administration

**Senior Administrative Staff** [1]

E. Govoni
*Vice President - Finance*

A. Headricks*
*Vice President - Human Resources*

J.P. Holder
*Vice President - Nursing*

J. Ratz
*Vice President - Planning & Hospital Services*

T. Warner
*Vice President - Quality & Utilization Management*

T.J.D. West
*Asst. Vice President Clinical Services*

W.V. Wilkinson
*Asst. Vice President Support Services*

**Department Heads**

J.L. Zientek
*Admitting & Outpatient Services*

J. Degen
*Building Services*

A. Simmonds
*(Acting Head), Chaplain Service*

C.D. Fernandes, D. Hill
*Financial Services*

D. Frair
*Materiels Management*

C. Morrison
*Library*

A. Buchanan
*Medical Records*

C. Hull, M. Morton, D. Pestell
*Nursing Services*

L.M. Rothney
*Nutrition*

M.T. Gannon
*Pharmacy*

A. Connor
*Photography*

L. Dutton
*Public Relations*

A. Kind
*Radiation Therapy*

K.K. Williamson
*Social Services*

P. Dickson
*Volunteer Services*

## Auxiliary Of The Princess Margaret Hospital and Lodge

President:
Mrs. J. Morden**
Mrs. M. Stewart*

* New Appointment in 1988-89
** Retirement/Resignation

[1] The senior administrative group was reorganized in 1989.

Writing/Concept:
OCI/PMH Public Relations Department

Photography:
OCI/PMH Photography Department

# 1958-1988

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